nar us zu	JU/ 12:20F1	T HEN.			LIONA WOMEN A I	00 .0	7 1100	۲۰۲
Complete and sen	d this form, toget	her with a			Mail Stop ISSUI Commissioner for P.O. Box 1450 Alexandria, Virg	ol Laten		
MAR 0 9 2007			1 7007	or <u>Fax</u>	(571)-273-2885	nimal) 19lo	ake 1 through 5 sh	ould be completed who
NSTRUCTIONS: 156 horopriate, All office of indicate and officeted	form should be used to correspondence including to below or directed off	for transmitti ng the Patent herwise in Bi	ng the 1550, advance or lock 1, by (a	ders and notification) specifying a new o	of maintenance fees correspondence address	will be ma s; and/or (t	illed to the current of indicating a separ-	are "FEE ADDRESS" (
CUÉRENT CORRESPONDE	IODS. NCE ADDRESS (Note: Use Bi	lock I for any cha	nge of address)		Foods) Temperatual Ti	hic certifics	te cannot be used for	domestic mailings of the any other accompanying or formal drawing, mu
26242	7590 01/19	/2007			·	welfingto of	Mailing or Transpor	elesian
NORMA E HEI HENDERSON P 13 JEFFERSON	ATENT LAW				I hereby certify that to States Postal Service addressed to the Ma transmitted to the US	his Fee(s) with suffic il Stop IS PTO (571)	Transmittal is being lent postage for first SUE FEE address a 273-2885, on the day	deposited with the Unit class mail in an envelo- above, or being facsimi te indicated below.
LONDONDERR	· · · · · · · · · · · · · · · · · · ·				Noama E	Hend	leason	(Depositor's name
3/09/2007 HDENESS2 (•				Arec-	ded		(Signatur
FC:2501		.00 BP			3/9/20		· · · · · · · · · · · · · · · · · · ·	
APPLICATION NO.	FILING.DATE			FIRST NAMED INVEN	iror		IEY DOCKET NO.	CONFIRMATION NO.
09/921,167 TITLE OF INVENTION:	08/02/2001	APATIS FO	R A NETWO	Simon Bennett ORK INDEPENDEN	r short message		MS-00101 Y SYSTEM	7201
TITLE OF INVENTION.	METHOD AND ATT	·						
1.			·					· · · · · · · · · · · · · · · · · · ·
APPLN. TYPE	SMALL ENTITY	ISSUE'F	EE DUE	PUBLICATION FEE	DUE PREV. PAID ISS	UE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	Me Yes	\$14	198 \$700	\$300	so		\$1700 \$100	00 04/19/2007
BXAMI	NER	ART	UNIT	CLASS-SUBCLAS	s	•		
PATEL, ASHO	KKUMAR B	21	54	709-206000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence				• -	the patent front page, in the patent of the		s 1 Norma	E. Henderso
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.				
3. ASSIGNEE NAME AN	ND RESIDENCE DATA	A TO BE PR	INTED ON T	THE PATENT (print	or type)			
PLEASE NOTE: Unio	ess an assigned is ident in 37 CFR 3.11. Com	lified below, pletion of this	no assignee form is NO	data will appear on Ta substitute for filir	the patent. If an assig ng an assignment.	pnee is iden	uitied below, the do	cument has been filed i
(A) NAME OF ASSIG	•	(B) RESIDENCE: (CITY and STATE OR	COUNTRY	Y)	•		
ZONA MOVILLO	com, INC.			Mian				
Please check the appropri	ate assignce category of	r categories (will not be pr	inted on the patent):	Individual 🖫	Corporation	or other private grou	ip entity Governme
4a. The following fce(s) a	•				(Please first reapply			
Publication Fee (No small entity discount permitted) Advance Order - # of Copies				Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number(enclose an extra copy of this form)				
5. Change in Entity Stat	SMALL ENTITY state	us. See 37 CF	R 1.27.	☐ b. Applicant is n	o longer claiming SM/	ALL ENTI	TY status. See 37 CF	R 1,27(g)(2).
NOTE: The Issue Fee and interest as shown by the n	Dublication Fee (if me	nired) will no	nt be accented	from anyone other (han the applicant; a re	gistered atte	orney or agent; or the	: assignee or other party
Authorized Signature	11-06.1	Lenda			Date	3/9	39,219	
The said on included many	Nama	E · Heal	deeson	·.	Registration	No	39,219	
This collection of informs an application. Confident submitting the completed his form and/or suggesting Box 1450, Alexandria, V. Alexandria, Virginia 223 Under the Paperwork Rec	ation is required by 37 (in the second of th	CFR 1.311. T 5 U.S.C. 122 c USPTO. Ti irden, should O NOT SENI	he information and 37 CFR me will vary be sent to the D FEES OR (on is required to obtain 1,14. This collection depending upon the Chief Information COMPLETED FORM	n or retain a benefit by is estimated to take 12 individual case. Any Officer, U.S. Patent an 4S TO THIS ADDRES of information unless i	the public minutes to comments of d Trademants. SS. SEND	which is to file (and complete, including on the amount of tirm it Office, U.S. Depar TO: Commissioner for valid OMB control	by the USPTO to procee, gathering, preparing, a te you require to compartment of Commerce, P. or Patents, P.O. Box 14:

PTOL-85 (Rev. 07/06) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE



Henderson Patent Law

y, New Hampshire 03053

voice/fax: 603-437-4400 normahenderson@comcast.net

FACSIMILE TRANSMITTAL SHEET

FROM:	Norma E.	Henderson	CONFIDENTIALITY NOTICE			
DATE:	March 9, 2	2007	This facsimile transmission and the accompanying documents contain legally privileged confidential information. The information is intended only for the use of the recipient named below. If you are not an intended recipient, you are hereby notified that any disclosure, copying, distribution, or exploitation of, or the taking of any action in reliance on, the contents of			
	OF PAGES TR NG COVER SI					
	receive the indicat fintely at: (603)	ted number of pages or if any pages are illegible, please 437-4400	this facsimile is strictly prohibited. If you have received this facsimile in error, please notify us immediately by telephone to arrange for the return of the original documents to us at our expense.			
	То:	Mail Stop ISSUE FEE				
	FIRM:	U.S. Patent and Trademark Office				
	RE: Issue Fee - Pat. App. Ser. No. 09/921,167					
	PHONE NUMBER:					
	FAX NUMBER:	571-273-2885	<u> </u>			
Notes/Co	OMMENTS:					
Issue Fee pay	yment for Patent	Application Ser. No. 09/921,167 (Docket No. 0564	50/01 19019 (ZMS-00101)).			
The following	ng items are being	sent herewith:				
	e Fee Transmitta		•			
Cre	dit Card form (1	page)				
I hereby cert	ify that this corre	spondence is being facsimile transmitted to the USI	PTO on 3/9/2007.			
Mora	Elder					
Norma E Ua	andausan					